

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG676 Electrical stimulation to improve muscle strength in chronic respiratory conditions, chronic heart failure and chronic kidney disease

The impact on equality has been assessed during guidance development according to the principles of the NICE Equality scheme.

Briefing

1. Have any potential equality issues been identified during the briefing process (development of the brief or discussion at the committee meeting), and, if so, what are they?

Age: The prevalence of COPD, CHF or CKD (stages 3 to 5) increases with age.

Gender:

- COPD is more common in men in the UK. However, in recent years, the prevalence has reached a plateau in men but continues to increase in women because of the increase in smoking among women.
- The incidence of heart failure is higher in men than women in the UK. However, people with heart failure with preserved ejection fraction are more likely to be older and female than those with heart failure with reduced ejection fraction.
- CKD stage 3 to 5 prevalence is higher in women than in men, 7.4% compared with 4.7% in England.

Disability: People with a chronic respiratory condition, chronic heart failure or chronic kidney disease are likely to be covered by the Equality Act 2010 if their condition has a substantial adverse impact on normal day-to-day activities for at least 12 months.

Socioeconomic status: Most chronic diseases are more common in people from lower socio-economic groups and are usually more severe

even in conditions where prevalence is lower. However, for COPD, it is unclear whether this pattern reflects exposure to cigarette smoke or to air pollutants, poor nutrition, crowding, or other factors related to low socioeconomic status.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee? (If there are exclusions listed in the brief (for example, populations, treatments or settings), are these justified?)

This was not thought to have an impact on the assessment of the procedure. No exclusions were applied.

3. Has any change to the brief (such as additional issues raised during the committee meeting) been agreed to highlight potential equality issues?

No

4. Have any additional stakeholders related to potential equality issues been identified during the committee meeting, and, if so, have changes to the stakeholder list been made?

No

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 10/06/2020

Consultation

1. Have the potential equality issues identified during the briefing process been addressed by the committee, and, if so, how?

The literature generally reflected that the conditions were more common in men than in women, with the age ranged from 46 to 76 years. No specific data relating to other issues mentioned earlier were identified in the literature presented in the overview.

2. Have any other potential equality issues been raised in the overview, specialist adviser questionnaires or patient commentary, and, if so, how has the committee addressed these?

No

3. Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?

No

4. Do the preliminary recommendations make it more difficult in practice for a specific group to access a technology or intervention compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

No

5. Is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

Not applicable

6. Are there any recommendations or explanations that the committee could make to remove or alleviate barriers to, or difficulties with, access identified in questions 4 or 5, or otherwise fulfil NICE's obligation to promote equality?

Not applicable

7. Have the committee's considerations of equality issues been described in the consultation document, and, if so, where?

No

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 10/06/2020

Final interventional procedures document

1. Have any additional potential equality issues been raised during the consultation, and, if so, how has the committee addressed these?

No

2. If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access a technology or intervention compared with

other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

Not applicable

3. If the recommendations have changed after consultation, is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

Not applicable

4. If the recommendations have changed after consultation, are there any recommendations or explanations that the committee could make to remove or alleviate barriers to, or difficulties with, access identified in questions 2 and 3, or otherwise fulfil NICE's obligations to promote equality?

Not applicable

5. Have the committee's considerations of equality issues been described in the final interventional procedures document, and, if so, where?

No

Mirella Marlow

Programme Director

Date: 11/06/2020